

<p><i>Effective on 12/08/2004.</i> <i>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</i></p> <h2 style="margin: 0;">FEE TRANSMITTAL</h2> <h3 style="margin: 0;">For FY 2009</h3>		<p>Complete if Known</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Application Number</td> <td>10/682,372-Conf. #6095</td> </tr> <tr> <td>Filing Date</td> <td>October 10, 2003</td> </tr> <tr> <td>First Named Inventor</td> <td>Stig OLLMAR</td> </tr> <tr> <td>Examiner Name</td> <td>N. Natnithadha</td> </tr> <tr> <td>Art Unit</td> <td>3735</td> </tr> <tr> <td>Attorney Docket No.</td> <td>0104-0777PUS1</td> </tr> </table>		Application Number	10/682,372-Conf. #6095	Filing Date	October 10, 2003	First Named Inventor	Stig OLLMAR	Examiner Name	N. Natnithadha	Art Unit	3735	Attorney Docket No.	0104-0777PUS1
Application Number	10/682,372-Conf. #6095														
Filing Date	October 10, 2003														
First Named Inventor	Stig OLLMAR														
Examiner Name	N. Natnithadha														
Art Unit	3735														
Attorney Docket No.	0104-0777PUS1														
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27															
TOTAL AMOUNT OF PAYMENT		(\$) 515.00													

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <u>02-2448</u>	Deposit Account Name: <u>Birch, Stewart, Kolasch & Birch, LLP</u>
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
	FILING FEES		SEARCH FEES		EXAMINATION FEES		
	Small Entity	Small Entity	Small Entity	Small Entity	Small Entity	Small Entity	
<u>Application Type</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fees Paid (\$)</u>
Utility	330	165	540	270	220	110	_____
Design	220	110	100	50	140	70	_____
Plant	220	110	330	165	170	85	_____
Reissue	330	165	540	270	650	325	_____
Provisional	220	110	0	0	0	0	_____
						<u>Small Entity</u>	
						<u>Fee (\$)</u>	<u>Fee (\$)</u>
2. EXCESS CLAIM FEES							
<u>Fee Description</u>						<u>Small Entity</u>	
Each claim over 20 (including Reissues)						52	26
Each independent claim over 3 (including Reissues)						220	110
Multiple dependent claims						390	195
<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>		<u>Multiple Dependent Claims</u>		
_____ - or HP = _____ x _____ = _____					<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	
HP = highest number of total claims paid for, if greater than 20.							
<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>				
_____ - or HP = _____ x _____ = _____							
HP = highest number of independent claims paid for, if greater than 3.							
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>		<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>		
_____ - 100 = _____	/50 = _____	(round up to a whole number) x _____		= _____			
4. OTHER FEE(S)							
Non-English Specification, \$130 fee (no small entity discount)						270.00	
Other (e.g., late filing surcharge): 2401 Notice of appeal						270.00	
2252 Extension for response within second month						245.00	

SUBMITTED BY			
Signature	Registration No. (Attorney/Agent)	43,368	Telephone (703) 205-8000
Name (Print/Type)	Date		
Paul C. Lewis	December 23, 2009		